

FORMS

GSOP 191-2 MASTER AGREEMENT ORDER (Lease Order)

1. Agency Billing Code

THIS FIELD IS MANDATORY. Place the five digit Agency Billing Code as assigned by the Department of General Service in this field. There is to be only one billing code per order. Local agencies without a billing code may obtain a billing code by calling (916) 323-1030. Once assigned a billing code it can be used on all future orders.

2. MRA Contract Number and Page Number

Enter the appropriate MRA number for the supplier with whom you are placing your order in this field. These numbers are located with the supplier's addresses in this Master Rental Agreement in Contractor Contacts Section. Page of Pages: enter the page number and total number of pages for each order. This should be shown with two digits: (i.e. 01 of 02).

3. SHIP TO

Enter the Ship To address of the requesting agency, including the room number, if any. Enter the name and telephone number of the person who will be responsible for accepting the work.

4. BILL TO

Enter the address where invoices will be sent. Enter the name **and** telephone number of the section that will be handling the invoice payment in your agency.

5. DATE

Enter the date the order will be mailed. The month, day and year should be indicated with two digits; (i.e. July 1, 1997 as 07/01/97).

6. AGENCY ORDER NUMBER

Enter **your** agency's assigned order number.

7. AMENDMENT NO.

If this is an amendment to an order, the number of the amendment, otherwise leave blank.

8. TO FIRM ADDRESS

Enter the contractor's name and address as shown above under contractor contacts.

9. DATE WANTED

The requested installation date.

10. FACILITIES READINESS DATE

The date the facility will be ready for the new equipment.

11.INSTALLATION/RECONNECTION DATE

FOR RELOCATIONS ONLY, the actual installation date or last reconnection date.

12.VENDOR NUMBER (VIN)

Enter the Contractor's Vendor Identification Number from above under Contractor Contacts.

13.FEDERAL EMPLOYEE IDENTIFICATION NUMBER (FEIN)

Enter the Contractor's FEIN number from above under Contractor Contacts.

14.ORDER TYPE (Rental, Maintenance, Co-terminous, etc.)

Enter the correct Order Type

15.INDIVIDUAL TERMINAL SYSTEM CLUSTER I.D. NUMBER (ITSC)

The Individual Terminal System Cluster to which this equipment will be attached. If not known leave blank.

16.CONTRACT PERIOD FROM - TO

The Contract From and TO dates. The lease term dates.

17.QTY.

The quantity for each item.

18.MODEL NUMBER

The model number from the Manufacturer's Suggested Retail Price list.

19.DESRIPTION

The description from the Manufacturer's Suggested Retail Price list.

20.PER UNIT \$ & MAINTENANCE \$

The DISCOUNTED price and maintenance cost from the respective Manufacturer's Suggested Retail Price lists for both the equipment and the maintenance.

21.MONTHLY RENT

The monthly rental amount is calculated by multiplying the lease rate factor, from the Contractor Cost Tables below, to the discounted per unit \$ and maintenance \$ total.

22.MONTHLY EXTENSION

The quantity (Qty, item 17) times the rental amount (Monthly Rent, item 21).

23.SUBTOTAL

The sum of the Monthly Extension column.

24.ONE-TIME CHARGES AND COST

One-time items and their charges - eg. installation, expedite, supplies, etc.

25. DURATION IN MONTHS AND DAYS

The duration of the order in months and days.

26. ONE TIME CHARGES

The total of the one-time charges.

27. TAXABLE TOTAL

The total of any taxable portion of the order. Can be a portion of one-time charges and Total Rental Charges.

28. TAX %

The Sales Tax rate at the "Ship To:" site.

29. TAX

The Taxable Total (item 27) times the tax rate.

30. NON-TAXABLE AMOUNT

The total of one-time non-taxable charges.

31. MAINTENANCE (IF NOT INCLUDED)

The maintenance charges that are not included in the rental charges.

32. GRAND TOTAL \$

The total of Items 27, 29, 30, and 31.

33. AMENDMENT AMOUNT

If this is an amendment to the order, the dollar amount of the changes created by this amendment.

34. OLD TOTAL

If this is an amendment to the order, the order total as of its latest revision.

35. FISCAL INFORMATION

Fiscal information as appropriate.

36. SIGNATURES

An original signature of the person with the proper signature authority within your department or agency to sign this order must appear on the order.